PTO/SB/22 (01-85)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136	(a) Docket Number (Optional) 3994994-144415 CENTRAL EAX GENTER
(Fees pursuam to the Consolidated Appropriations Act. 2005 (H.R. 4818).)	
Application Number 10/616,140	FIRED FEB 0 7 2008
FOR WHITE BODY MODELING AND VIRTUAL	
Art Unit 2123	Examiner KIM Funhee
Art Unit 2123 This is a request under the provisions of 37 CFR 1 136(a) to extend tapplication.	he period for filling a reply with the deeper
application. The requested extension and fee are as follows (check time period d	Small Entity Fee
<u>rev</u>	\$60 \$
One month (37 CFR 1 17(a)(1))	\$230 \$
Two months (37 CFR 1 17(a)(2)) \$460	\$625 \$ 1050
Three months (37 CFR 1 17(a)(3)) \$1050	
Four months (37 CFR 1 17(a)(4)) \$1640	\$820
Five months (37 CFR 1.37(a)(5)) \$2230	\$1115 \$
Applicant claims small entity status. See 37 CFR 1.27.	02/08/2008 PCHOMP 00000095 503915 13816140
A check in the amount of the fee is enclosed.	01 FC:1253 1050.00 DA
Form PTO-2038 is attached	
The Director has already been authorized to charge fee:	hich may be required, of cledit any distribution from the company of this sheet.
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I am the applicant/inventor	
assignee of record of the entire interest.	E I
attorney or agent of record. Registration	Number
attorney or agent under 37 CFR 1.34 Registration number if acting under 37 CFR 1.3	34
Jan Z.	<u>February 7, 2008</u>
Signature	Date
- w Brannowski	614 227-2188 Telephone Number
Edwin M. Baranowski Typed or printed name	
NOTE: Signatures of 84 the inventors or assignees of record of the entire interest of signature is required, see below	k their tebiocoutative(z) are redirined. Shipmy umphas forwer it work return one
Signature is required. See Submitte	d.
Total of forms are submitted. This collection or information is required by 37 CFR 1 136(a). The information is required by 37 CFR 1 136(a). The information is required by 37 U.S.C. 122 and USPTO to process) an application. Comfidentiality is governed by 35 U.S.C. 122 and complete, including gathering, preparing, and submitting the torm and/or suggested comments on the amount of time you require to complete this form and/or suggested u.S. Patient and Tragement Office. U.S. Department of Commerce, P.O. Box 1450. U.S. Patient and Tragement Office. U.S. Department of Commerce, P.O. Box 1450. FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. If you need assistance in completing the form	Ins for reducing this burden, should be sent to the Chief Indominated Alexandra, VA 22313-1450 DO NOT SEND FEES OR COMPLETED BOX 1450, Alexandria, VA 22313-1450.

PTO/SB/22 (01-98)
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under the paperwork Reduction Act of 1933, the Paperwork	CED 1 136(a)	Docket Number (Optional)	pE		VED
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